
Primary Care Workforce Development Plan



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Colorado Workforce Shortage

- An **insufficient supply** of health professionals remains among the most commonly cited reasons for **poor access** to care at the *community* level.
- **Nearly all counties** in Colorado experience some degree of shortage of primary health services for at least some members of the community.



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Primary Care

Health Professional Shortage Areas (HPSAs)

Map Prepared By:

Colorado Department
of Public Health
and Environment GIS

Primary Care HPSA types

• Facility Designation

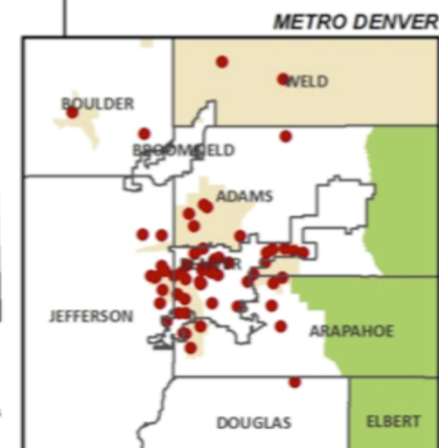
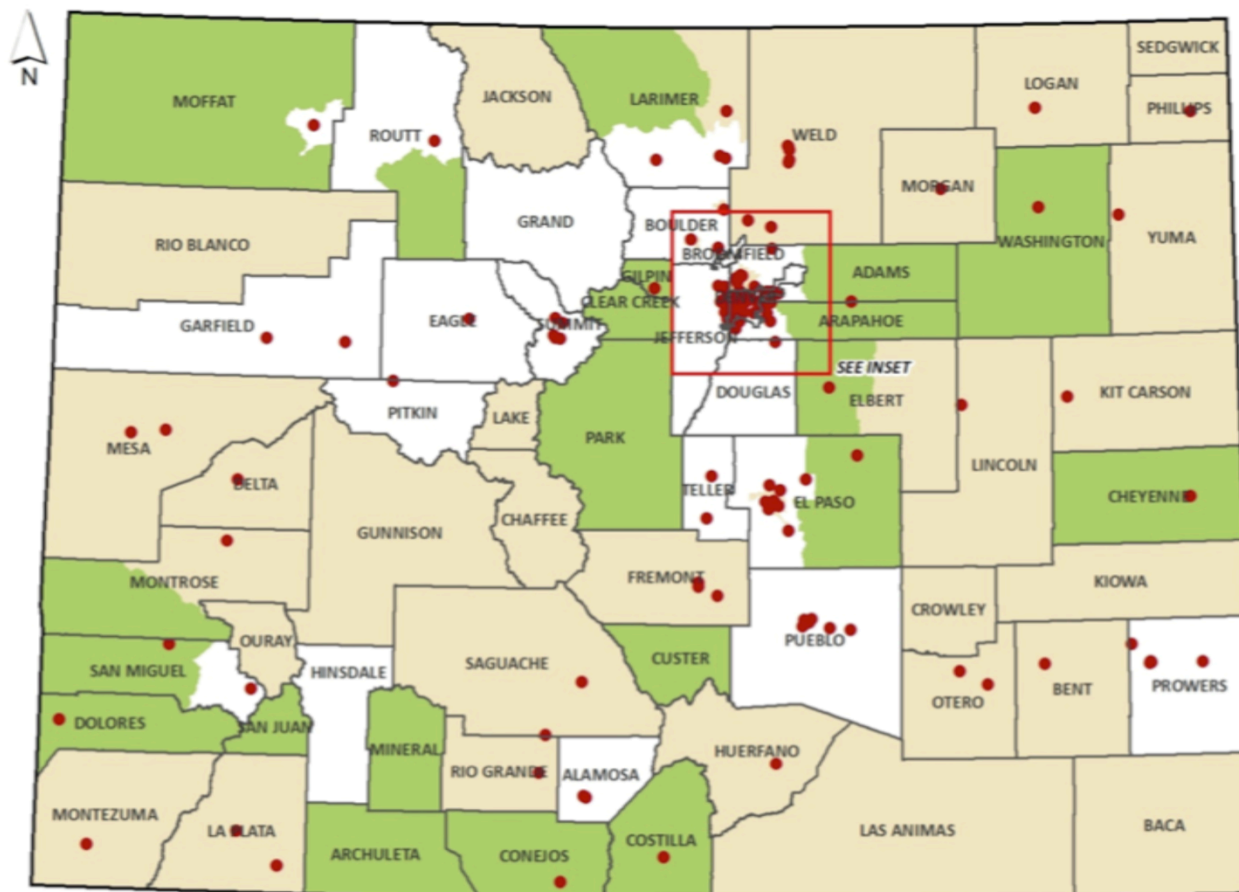
Geographic

Low-Income

Not Designated

Data Current as of May 2014

For information on how to develop
a Health Professional Shortage Area
Application for your community, call
303-692-2466,
or visit the Primary Care Office
website at the
Colorado Department of
Public Health and Environment



Map Created May 1, 2014

Source: Shortage Designation Branch, HRSA, U.S. Department of Health and Human Services

0 15 30 60 Miles

Access and Cost

- Access challenges resulting from workforce insufficiency can lead to higher costs for the treatment of **ambulatory care sensitive conditions**.
- Access challenges resulting from workforce insufficiency can lead to higher costs to individuals, not captured in health spending data (e.g. higher travel costs, increased time away from work, child care costs).



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Workforce Cost Paradoxes

- Poor access can suppress overall health care costs by causing reductions or delays in “elective” care.
- “Excess” health professional capacity may increase some costs by increasing the service to fixed cost components of care delivery.



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Workforce Cost Paradoxes

- There is some evidence that non-physician providers, who are able to practice with an expanded scope, are also able to negotiate higher plan reimbursements for like procedures.
- There is some evidence that non-physician providers refer to specialty care at higher rates, thus effecting overall cost of care.



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The Obvious Response

- The obvious answer is to increase the supply of health professionals to alleviate workforce shortages.
- The obvious answer is, however, probably the wrong answer or at least an incomplete answer.



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Our Frame on Recommendations

- The problem of workforce shortage cannot be considered on the scale of the state or the ratio of providers to predicted demand.
- Workforce capacity needs are not always defined by geography.
- A shortage of providers is best defined from the perspective of policy as “Can I get the care that I need, when I need it, within a reasonable distance from my home?”



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Our Frame on Recommendations

- Health professional supply problems overwhelmingly effect low income, publicly insured, uninsured and geographically isolated Coloradans.
- The greatest potential for improving health status, through better access to care, lies in the needs of these specific population groups.



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Objective I

- Develop a reliable, current and relevant workforce dataset that describes primary care practice characteristics of licensed providers and reveals meaningful indicators of current primary care capacity in Colorado.
 - Provider Data Collection



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Objective II

- Engage in an iterative process of community needs assessment for primary care services in relation to existing and projected supply of licensed healthcare professionals.
 - Community Needs Assessment



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Objective III

- Develop an aligned, cross sector strategy for the training of health professionals who are willing and prepared to address the primary care needs of Colorado's underserved communities.
 - Development of Interdisciplinary and Underserved-focused Training Tracks
 - Pursue Diversity of Workforce as a Specific Strategy to Reduce Access to Care Barriers
 - Improve Pipeline Coordination
 - Improve Health Sciences and Health Professions Academic Advising



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Objective IV

- Develop an aligned cross sector strategy for the recruitment and retention of health professionals who are willing and prepared to address the primary care needs of Colorado's underserved communities.
 - Clinical Placement Clearinghouse
 - Faculty and Preceptors
 - Site Development
 - Community and Economic Development
 - Effectively Targeted Incentive Programs



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Objective V

- Create a common vision for state workforce policy, which aligns activities, projects and goals across sectors toward resolving the workforce shortage in underserved communities.
 - Data Collection
 - Reimbursement
 - Graduate Medical Education
 - Increasing Available Residencies and Clinical Placement Opportunities



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Questions and Discussion

Steve Holloway
Primary Care Office
steve.holloway@state.co.us

